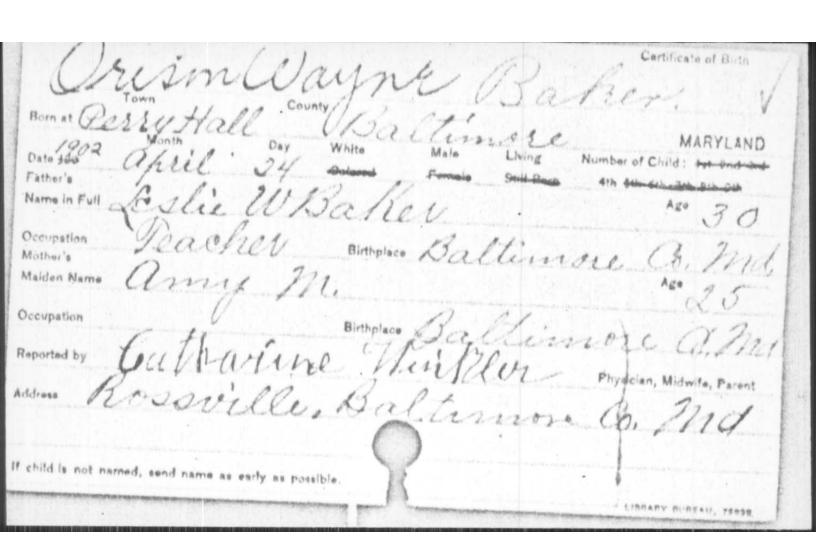
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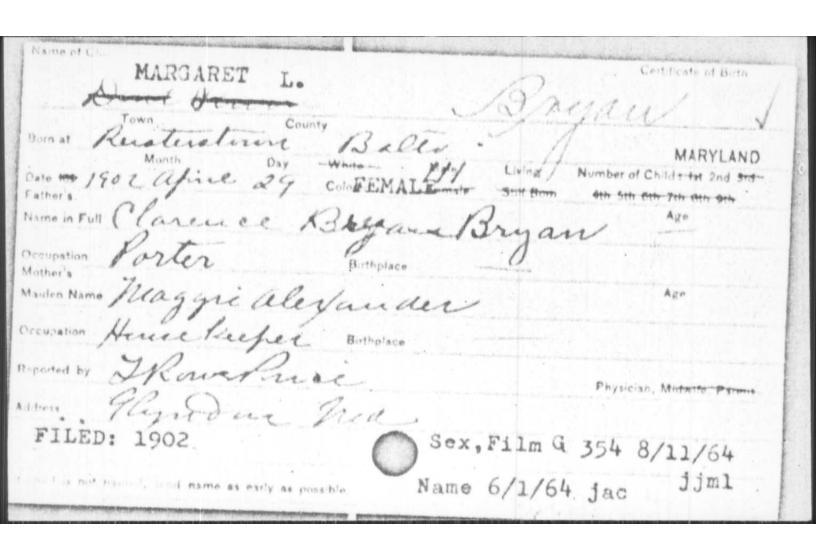
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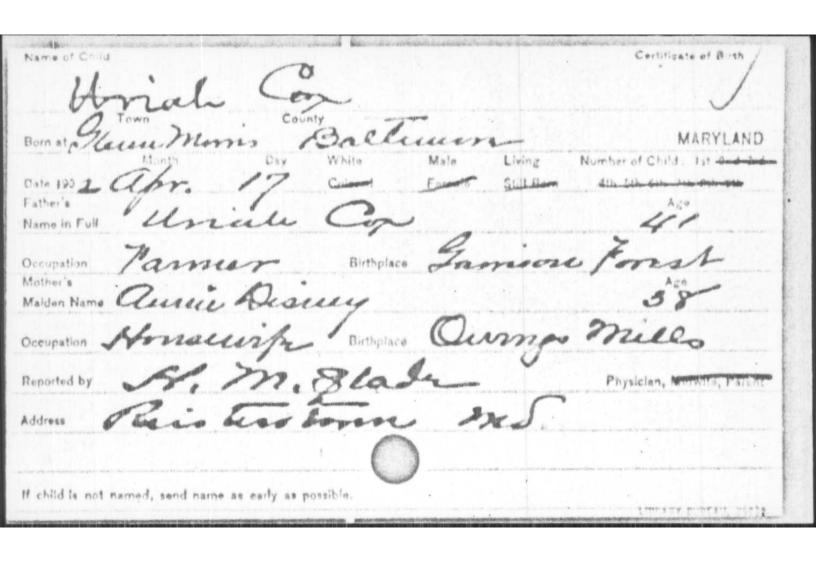
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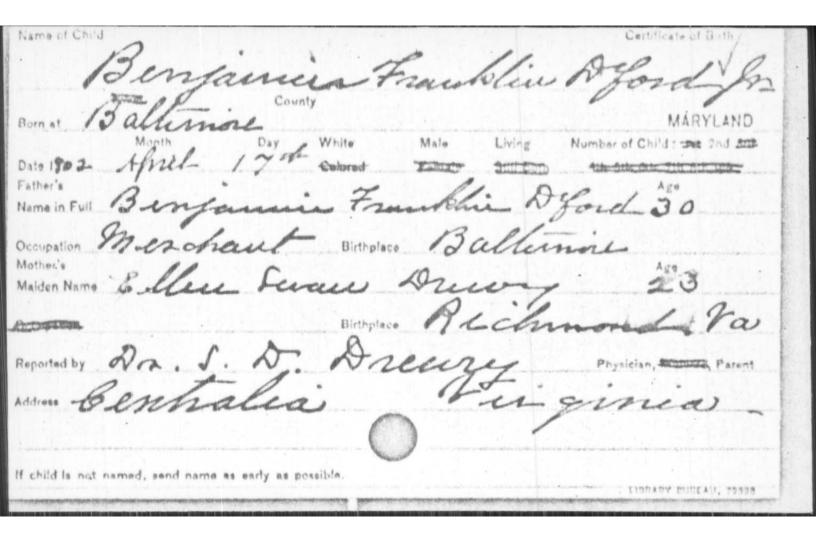
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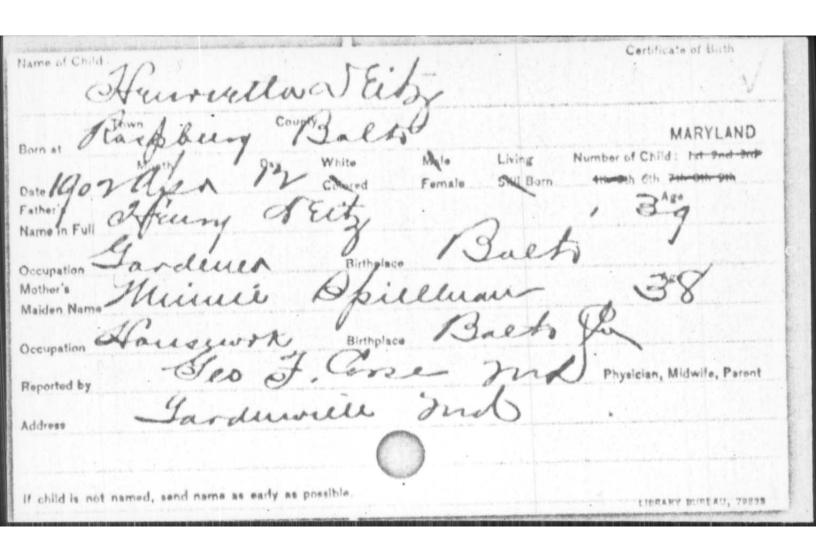
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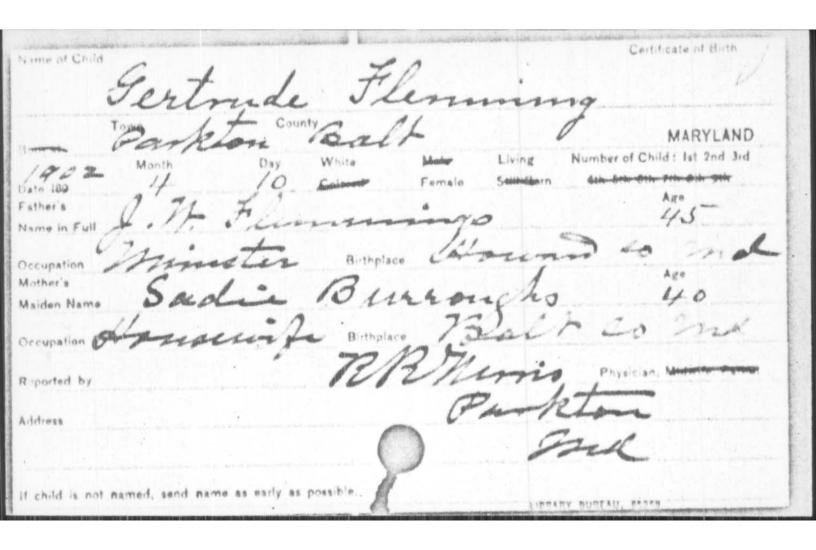
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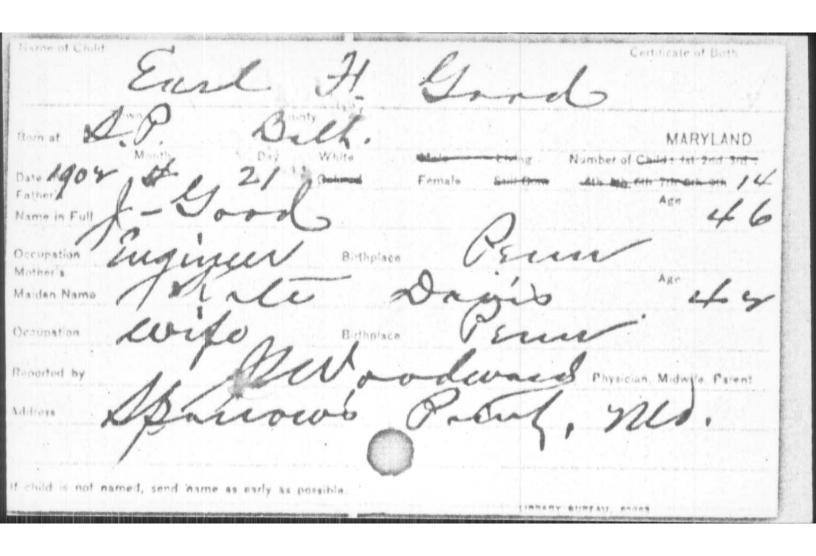
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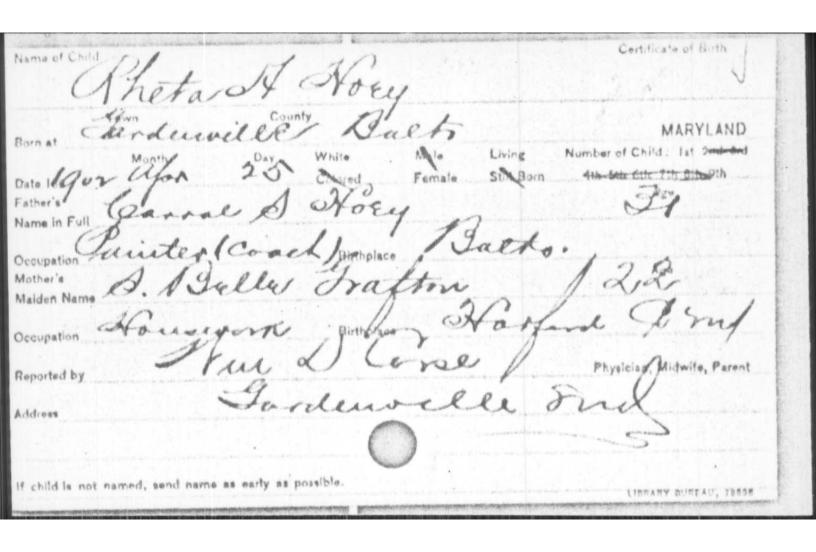
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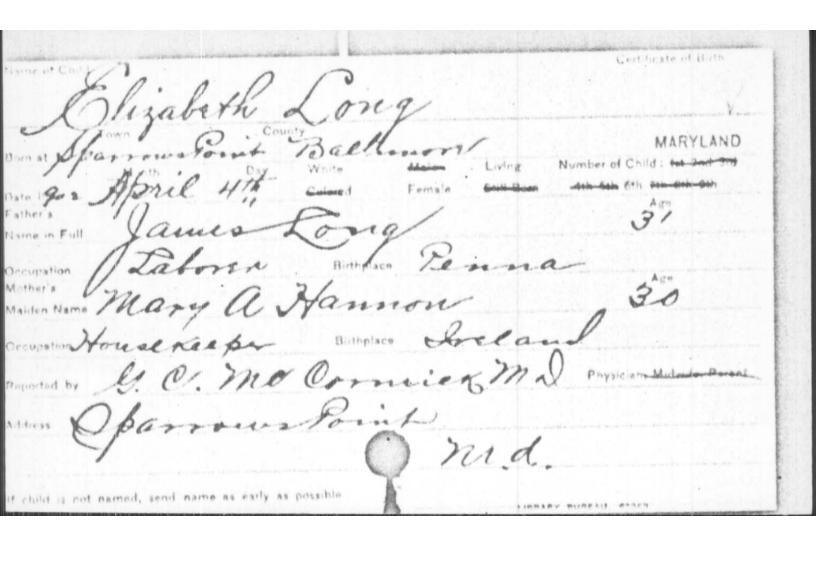
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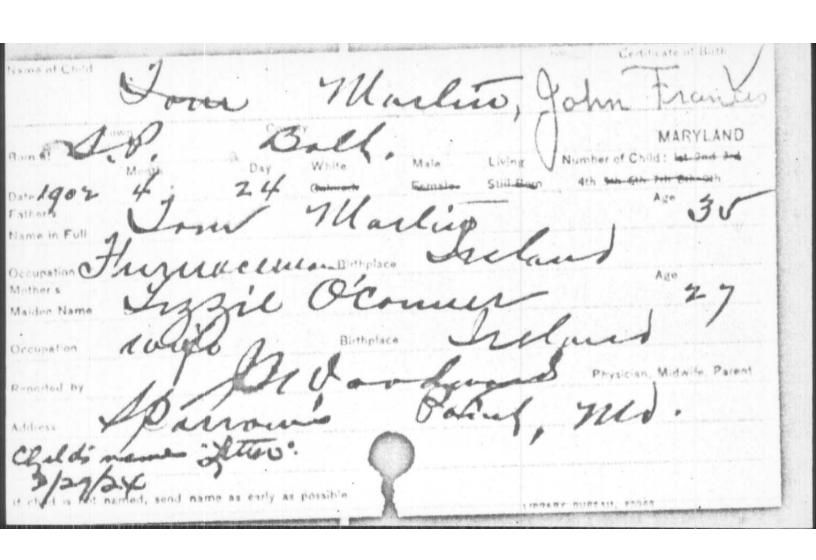
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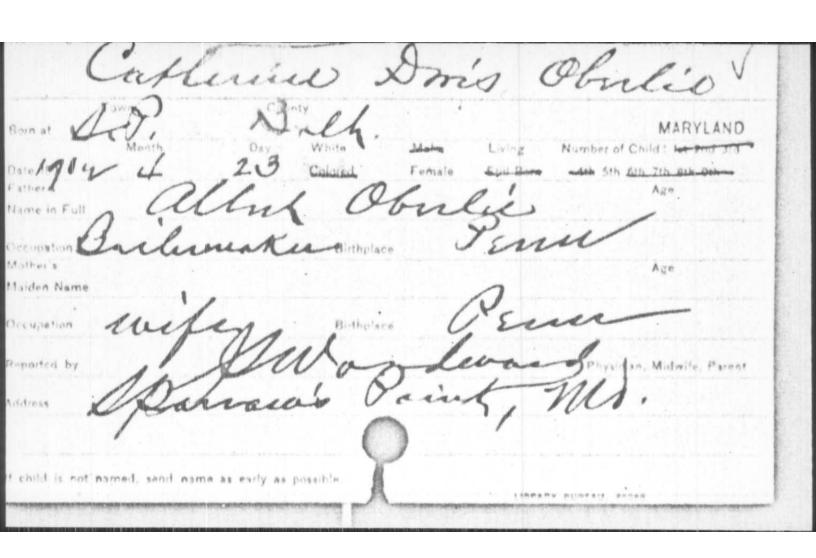
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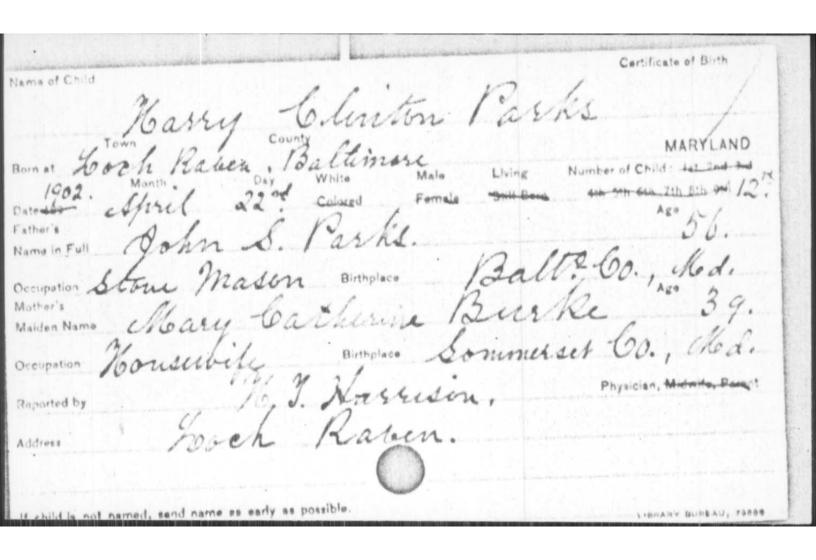
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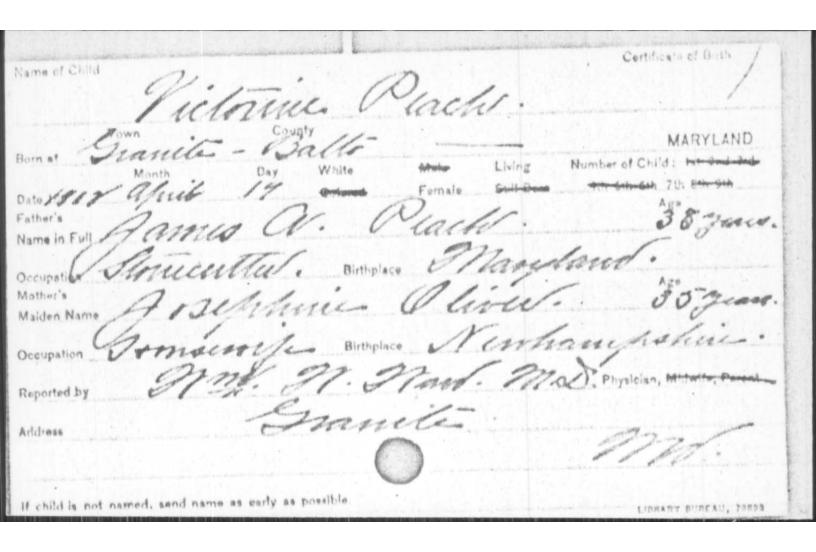
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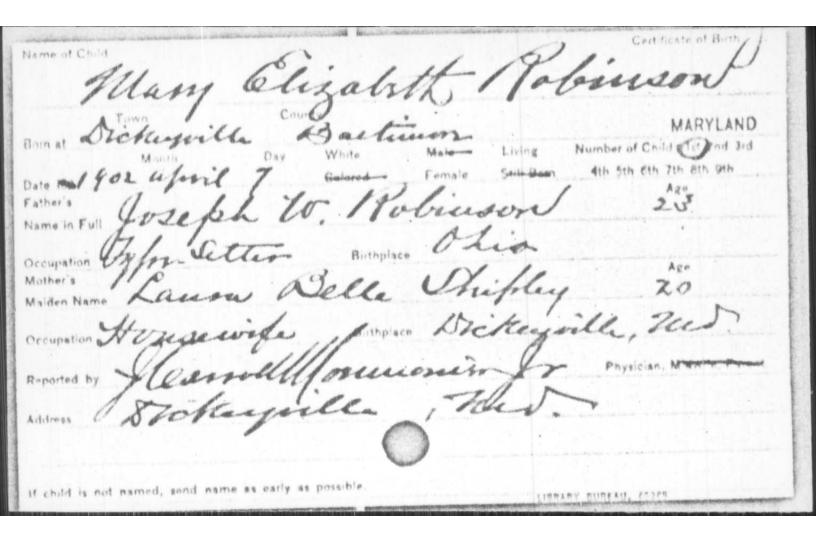
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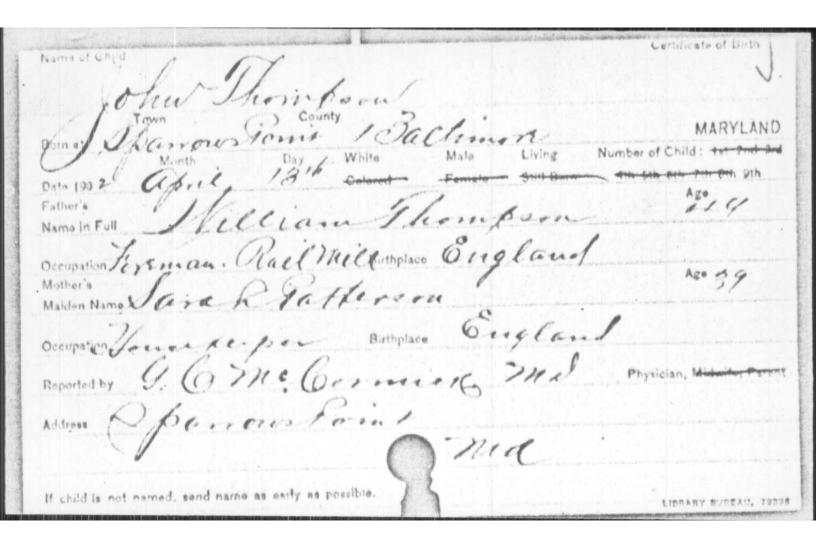
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Reported by Thurburgh Birthplace

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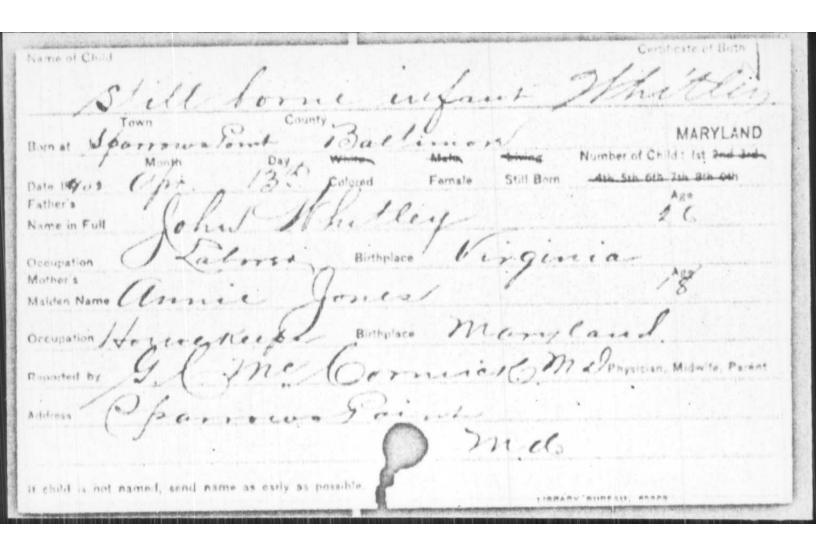
Physician, Midwite Parent

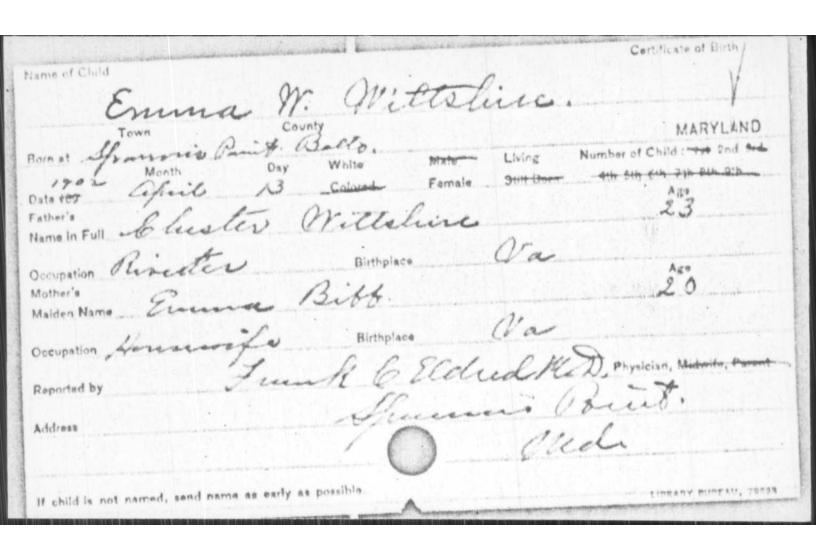
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If child is not named, send name as early as possible.

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Certificate of Birth Name of Child MARYLAND Number of Child; 1st 2nd 3rd Living White 4th 5th 6th 7th 8th 9th 10. Ago :: Father's Name in Full Occupation. Age . Mother's Maiden Name Occupation Physician, Michaele, Parent Reported by Address if child is not named, send name as early as possible. 1. INTERY BUREAU, 79508





Name of Child

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